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	to respond to a collection of information unless it displays a valid OMB control number.						
UTILITY	Attorney Docket No.   EQUI0001CIP						
PATENT APPLICATION	First Inventor or Application Identifier   Samaniego et al.						
TRANSMITTAL	Title   Automated Media Delivery System						
(Only for new nonprovisional applications under 37 C.F R § 1.53(b))	Express Mail Label No. EL816158533US						
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application content	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231						
* Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	Microfiche Computer Program (Appendix)      Nucleatide and (av Amine Acid Soruppes Submission)						
2. X Specification [Total Pages 35 (preferred arrangement set forth below)	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)						
- Descriptive title of the Invention	a. Computer Readable Copy						
<ul> <li>Cross References to Related Applications</li> <li>Statement Regarding Fed sponsored R &amp; D</li> </ul>	b. Paper Copy (identical to computer copy)						
- Reference to Microfiche Appendix	c. Statement verifying identity of above copies						
- Background of the Invention	ACCOMPANYING APPLICATION PARTS						
- Brief Summary of the Invention	7 X Assignment Papers (cover sheet & document(s))						
<ul> <li>Brief Description of the Drawings (<i>if filed</i>)</li> <li>Detailed Description</li> </ul>	8. X 37 C.F.R.§3.73(b) Statement X Power of Attorney						
<ul><li>Claim(s)</li><li>Abstract of the Disclosure</li></ul>	9. English Translation Document (if applicable)						
3. X Drawing(s) (35 U.S.C. 113) [Total Sheets 23	] 10. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations						
4. Oath or Declaration [Total Pages 4	] 11. Preliminary Amendment						
a. X Newly executed (original or copy)	12. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)						
b. Copy from a prior application (37 C.F.R. § 1.63(d))  (37 Continuation/divisional with Box 16 completed)  (37 C.F.R. § 1.63(d))  * Small Entity  Statement filed in prior application							
DELETION OF INVENTOR(S) Signed statement attached deleting  (PTO/SB/09-12) Status still proper  (PTO/SB/09-12) Certified Copy of Priority Document(s)							
inventor(s) named in the prior appl see 37 C.F.R §§ 1.63(d)(2) and 1	olication, (if foreign priority is claimed)						
NOTE FOR ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL	LL ENTITY COLON						
FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), I IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. §	<u>\$ 1 28).</u>						
16. If a CONTINUING APPLICATION, check appropriate bo	pox, and supply the requisite information below and in a preliminary amendment.						
Continuation Divisional X Continuation-	• • • • • • • • • • • • • • • • • • • •						
For CONTINUATION or DIVISIONAL APPS only: The entire disc	sclosure of the prior application, from which an oath or declaration is supplied						
under Box 4b, is considered a part of the disclosure of the acc reference. The incorporation can only be relied upon when a	ccompanying continuation or divisional application and is hereby incorporated by portion has been inadvertently omitted from the submitted application parts.						
	PONDENCE ADDRESS						
Customer Number or Bar Code Label  (Insert Customer N.)	or Correspondence address below  No or Attach bar code label here)						
Name							
Address							
City	State Zip Code						
Country Telepho	one Fax						
Name (Pnnt/Type) Michael A. Glenn	Registration No. (Attorney/Agent) 30,176						
Signature (7)	Date 8/14/01						
Burden Hour Statement: This form is estimated to take 0.2 hours	s to complete. Time will vary depending upon the needs of the individual case. Any						

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL		Complete if Known					
I LL IIIAIIO	1411 1 17-7	Application Number	Unassigned				
for FY 1	999	Filing Date	Herewith				
Patent fees are subject to a	nnual revision	First Named Inventor	Samaniego et al. Unassigned				
Small Entity payments <u>must</u> be supported otherwise large entity fees must be paid	d by a small entity statement, ' See Forms PTO/SB/09-12	Examiner Name					
See 37 C F R §§ 1 27		Group / Art Unit	Unassigned				
TOTAL AMOUNT OF PAYMENT	(\$) 475.00	Attorney Docket No.	EQUI0001CIP				

METHOD	OF PAYMENT	check one)	FEE CALCULATION (continued)								
1. [X] indicated fe	nissioner is hereby au ees and credit any ov		Large Fee	DDITI Entity Fee	/Smal Fee	l Entity Fee	y	Description	1	Fee Paid	
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Deposit	ael A. Glenn		127	50	227	25	Surcharge - late p	provisional fili	ng fee or		
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	ge Any Additional Fee Re er 37 CFR §§ 1 16 and 1		147	2,520	147	2,520	For filing a request for reexamination				
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Fee Fee Fee	Fee Fee Descrip	tion Fee Paid	118	1,360	218	680	Extension for rep	ly within four	th month		
Code (\$) Code 101 760 201	∍ (ᢌ) 380 Utility filing fee		128	1,850	228	925	Extension for rep	ly within fifth	month		
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114 150 214	75 Provisional fili		138	1,510	138	1,510	Petition to institut	•			
114 130 214			140	110	240	55	Petition to revive				
	SUBTOTAL (1)	(\$) 355.00	141	1,210	241	605	Petition to revive	- unintention	al		
2. EXTRA CL		_	142	1,210	242	605	Utility issue fee (d	or reissue)			
Fee from Extra Claims below Fee Paid		143	430	243	215	Design issue fee					
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Independent 4 - 3** = 1 X 40 = 40.00  Multiple Dependent = =		40.00	122	130	122	130	Petitions to the Commissioner				
		123	50	123	50	Petitions related to provisional applications					
**or number previously paid, if greater, For Reissues, see below		126	240	126	240	Submission of Information Disclosure Stmt					
Large Entity Smale Fee Fee Fee Code (\$) Code	Fee Fee Des	cription	581	40	581	40	Recording each property (times n			80.00	
103 18 203	9 Claims in exce		146 760 246 380 Filing a submission after final rejection (37 CFR § 1 129(a))								
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	SUBTOTAL (2)	(\$) 40.00	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 80.00						0.00		
SUBMITTED BY Complete (if applicable)											
Name (Print/Type) Michael A. Glenn				Registration No. (Attorney/Agent) 30,176 Telephone 650-474				-8400			
Signature	ignature 2								Date 8/14/01		

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